

PART B - FEE(S) TRANSMITTAL

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| (Date) |
| (Date) |
| (Date) |

AKERMAN SENTERFITT

P.O. BOX 3188

WEST PALM BEACH, FL 33402-3188

| APPLICATION NO. | FILED DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | EXPIRATION NO. |
|-----------------|------------|----------------------|---------------------|----------------|
|-----------------|------------|----------------------|---------------------|----------------|

10/01/350

03/16/2004

Mark S. Nichols

7522-8

2166

TITLE OF INVENTION: PUSHING LUBER

| APPL. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL PUB(S) DUE | DATE DUE |
|------------|--------------|---------------|---------------------|----------------------|------------------|----------|
|------------|--------------|---------------|---------------------|----------------------|------------------|----------|

nonprovisional

YES

\$700

\$300

\$0

\$1000

03/05/2007

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

ROWAN, KURT C.

3643

043-642390

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address for Change of Correspondence address form (PTO/SB-122) attached.

☐ "Fee Address" indication for "Fee Address" indication form (PTO/SB-122) attached. Use of a Customer Number is required.

2. For printing on the patent from page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 AKERMAN SENTERFITT

2 Michael K. Dixon

3

3. ASSIGNOR NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (prior or type):

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation or set forth in 37 CFR 1.311. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 30-0351. (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signatory

Michael K. Dixon

Date

January 29, 2007

Typed or printed name

Registration No.

46,665

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application (Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form in the USPTO. Time will vary depending upon the individual case. Any comments on the amount of this, you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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